



# Children & Family News

June 2004

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*N.D. Dept. of Human Services' Children & Family Services Division Update*

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## New Web Site Links

### Research To Policy

To promote high quality research in child care and early education and the use of that research in policymaking, the National Center for Children in Poverty, the Inter-University Consortium for Political and Social Research at the University of Michigan, and the U.S. Department of Health and Human Services' Child Care Bureau have launched the National Center for Child Care and Early Education Research Connections Web site at <http://www.childcareresearch.org>.

Designed to serve researchers and policymakers, the Web site is built on a relational database and includes a searchable research collection, data sets for secondary analysis, and a 50-state data tool to compare policies within and across states. Research Connections encourages researchers to contribute to the Web site. For more information, visit the Web site or e-mail [contact@childcareresearch.org](mailto:contact@childcareresearch.org).

## Staff Member Honored

Infant Toddler Enrichment Program trainers presented Corinne Bennett with a special Sakakawea award during the "Discoveries of Infancy" Tri-state Infant and Toddler Conference held this spring in Bismarck.

The award recognizes Bennett's role in securing and sustaining the state's ongoing partnership with the Bush Foundation to strengthen early child care services through provider training and professional development. Bennett has been instrumental in obtaining Bush Foundation support totaling \$ 5,245,713, which has enhanced the quality of services to young children in North Dakota.

## State Plan Is On The Web

The Children and Family Services Division has consolidated state plans involving IV-B Subparts I and II, the Child Abuse Prevention and Treatment Act Plan, and the Chafee Foster Care Independence Program Plan into one document, which is available on the department's Web site at <http://www.state.nd.us/humanservices/info/pubs/family.html>. The document includes the final report for fiscal years 2000–2004 and includes planning and activity through the 2009 fiscal year.

## Work Analysis Planned

The National Resource Center for Family-Centered Practice is conducting a workload analysis in North Dakota in August and September 2004. This effort will help North Dakota establish realistic standards and time frames to ensure safe and permanent families for children. This recommended process is unique to public child welfare services and will include an analysis of intake and assessment processes, as well as the workload involved in assuring ongoing family services. Data gathered will guide leaders toward strategies to address the timeliness and accuracy of case decisions and to better manage limited agency resources.

The workload analysis requires significant data collection and interpretation to identify and clarify:

1. the average number of hours (per month) available for front-line staff to respond to families directly or indirectly on case activities;
2. estimated average amount of time per function (per family) required for family-centered approaches, accurate case decisions, and case movement;
3. total number of hours (per family) per month demand upon front-line staff; and
4. the causes for demand and capacity imbalance and management solutions.

## New Parent Aides Trained

Eight new parent aides participated in their initial training this spring. The University of North Dakota Children and Family Services Training Center facilitated this training. Parent aides are para-professionals employed by county social service agencies to provide services to parents who are experiencing difficulties parenting children. Parent aide services are one component of family preservation services. Parent aide services focus on the development of a trusting relationship between the parent and the parent aide. This service helps prevent out-of-home placement of children by enabling families to identify and utilize formal and informal supportive resources in the community and reduces the likelihood of child abuse and neglect.

Congratulations to the eight new parent aides. They are employed in Barnes, Cass, Dickey, Foster, LaMoure, McIntosh, Traill, and Walsh counties.

## Counties Can Claim For Targeted Case Management

In May, the Department of Human Services notified counties that they could begin submitting claims to the Medicaid program for targeted case management and wraparound services.

Claims can only be submitted for care coordination work provided by county staff certified in the wraparound process, which uses individualized, strength-based, needs-driven planning. Counties must also complete a Medicaid provider application and must enter the child's treatment plan into the single plan of care computer system before submitting claims.

Under the Medicaid state plan amendment, targeted case management services are an allowable expense if they are provided for children involved in the child protection system and services are required or recommended, or the children are placed out of the home.

Because Medicaid is the "payer of last resort," counties can only access Medicaid funding for case management services if children are not eligible for IV-E funding and staff cannot be reimbursed

through Family Focused funding. The fiscal impact of this additional funding has not been determined and will be tracked.

Children and Family Services Division Director Paul Ronningen said, "DHS is pleased to be able to provide an additional revenue source for counties during this time of declining resources."

In order to launch the service, the state's Medicaid Management Information System (MMIS) had to be reprogrammed and extensive testing had to be conducted to make sure other billing processes were not compromised. MMIS was developed in 1978 and has been modified over the years to meet changing requirements and program needs. The department is currently evaluating options for replacing this antiquated system before federal funding for system development expires.

## Meth Treatment Facts

- People recovering from methamphetamine addiction benefit from the same treatment strategies used to address other addictions.
- Matching an individual's symptoms to the appropriate treatment level, and retaining people in treatment and services for sufficient time are important for successful treatment.
- Recovering from substance abuse addictions, including meth addiction, is an ongoing process that is very similar to chronic illness management.
- It is unrealistic to expect a "cure." Recovery may involve more than one treatment episode.
- There are currently no medications available to treat addiction or overdose due to meth.
- Residential and outpatient treatment can be effective for people addicted to meth, and generally require a minimum of 90 days, including a detoxification period long enough for some clearing of thinking and judgment.

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